

PUREVISION TORIC TRIAL ORDER FORM*

Fax order to 1-800-356-8056



ACCOUNT #	<input type="text"/>	DATE	<input type="text"/>
ACCT NAME	<input type="text"/>	PHONE #	<input type="text"/>
STATE	<input type="text"/>	ZIP CODE	<input type="text"/>
		FAX#	<input type="text"/>

AXIS	CHOOSE 1 CYLINDER PER ORDER																	
						0.75 <input type="radio"/>	1.25 <input type="radio"/>	1.75 <input type="radio"/>	2.25 <input type="radio"/>									
POWER	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150	160	170	180
PLANO																		
-0.25																		
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-7.50																		
-8.00																		
-8.50																		
-9.00																		
+0.25																		
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+5.00																		
+5.25																		
+5.50																		
+5.75																		
+6.00																		

*Trial Lens orders are subject to Trial Bank Availability